

# **Spectrum Healthcare Resources**

## **HIPAA Notice**

### **HIPAA Compliance Statement**

At SHR, understanding and complying with HIPAA standards is a key priority. SHR has studied the regulations and is taking appropriate action to comply with HIPAA standards.

SHR already maintains a heightened sensitivity to client and personal information. All SHR associates are expected to handle sensitive and personal information in a manner that ensures confidentiality. In addition, SHR senior management has committed resources to addressing HIPAA regulations. SHR will provide ongoing training to all employees.

SHR is dedicated to protecting the security and confidentiality of our clients' patient information. For more information on the TeamHealth/SHR HIPAA Compliance Program, contact Bob Joyner, Corporate Compliance at 865-293-5500.

### **What is HIPAA?**

HIPAA stands for the Health Insurance Portability and Accountability Act. Portability guarantees health coverage when an individual's job changes. Accountability requires health care institutions to protect patient information. As a company we are required to take REASONABLE MEASURES to protect the privacy of patients' protected health information.

### **Does HIPAA apply to me?**

HIPAA applies to everyone. If you work with patients, or with information about patients, you need to know about HIPAA. Even if you have no direct patient contact, the law still applies to you, simply because you work here. So, it's important that everyone knows about HIPAA.

### **What is Protected Health Information (PHI)?**

Any information that identifies or could identify a person. The person could be living or dead. Information could be about the past, present or future physical health mental health or condition of a person. Written on paper, displayed or stored in a computer, or spoken in conversation.

### **Examples of PHI**

Name	Birth date
Address	Certificate/license number
SSN	Account number
Relatives' names	Finger/voice print
Employer names	Photographic images
E-mail address	Internet Protocol (IPP address)
Medical Record Number	Any unique identifying number, characteristic or code
Health plan beneficiary number	Any vehicle or device serial number
Telephone number	Web URL
Fax number	

### **What can we do with PHI?**

Covered entities are free to use PHI for the purposes of TREATMENT, PAYMENT and HEALTHCARE OPERATIONS. This includes things like ordering lab tests, billing, quality control & credentialing. Almost everything else requires patient authorization. One Exception: disclosures required by law.

### **What is meant by "Use" & "Disclosure"?**

The Privacy Rules of HIPAA limit both the use and disclosure of patient information. "Use" refers to what we do with information inside our institution. "Disclosure" means the information is given out to another institution to use. Patients typically give permission for use or disclosure of their information by signing a written form.

**What patient information can I look at?**

If it is not part of your job, it's not part of your business! If you are not involved in a patient's care you are not allowed to review their health information. NO ONE is allowed to look up information on friends, strangers, family members or even themselves!

**What do I do if I find papers that contain protected health information?**

Papers that have protected health information on them should not be left out in the open or unattended. If you find papers that contain protected health information you should find the owner and return the papers to them or give them to your supervisor. Fax machines and printers that transmit protected health information should be located in a private area.

**What are patient's rights under HIPAA?**

The HIPAA Privacy Regulations grant patients six (6) new rights in connection with their protected health information. Our organization will be implementing new policies and procedures to provide these rights to our patients.

**1. Receive Notice of Privacy Practices**

Patients will receive a notice describing Military Health Systems (MHS) privacy practices - that is, when and why we use and disclose a patient's protected health information. The notice will give examples of disclosures we might make as well disclosures we are required by law to make.

**2. Inspect and Get a Copy of Their Protected Health Information**

Patients have the right to inspect and get a copy of their protected health information. There are limited exceptions to this rule - for instance, access to psychotherapy notes or information that may harm the patient or others may be denied. MHS procedures will assure that patient's requests for access to their information are handled properly.

**3. Amend Their Protected Health Information**

Patients have the right to request that their protected health information be amended or corrected in those cases where the information is incorrect or incomplete. MHS will have procedures that outline how patient requests for amendments will be processed.

**4. Request Restrictions on Disclosures**

Patients have the right to request restrictions on how our organization uses and discloses their protected health information. MHS policies and procedures will spell out who such requests should be submitted to and how we will respond to such requests.

**5. Request Alternative Means of Communication**

Patients have the right to ask that we communicate their protected health information by alternative means. For example, a patient may request that written correspondence from her doctor be mailed to a special post office box. MHS procedures will outline how these requests will be processed.

**6. Obtain Accounting of Disclosures**

Patients may get an accounting - a detailed listing - of all disclosures of their protected health information made during the six years prior to the date of the request. The accounting does not need to include any disclosures made to carry out treatment, payment or health care operations. MHS procedures will identify who will be responsible for providing these listings.

**Violation of HIPAA**

Unintentional disclosure of information can lead to civil fines up to \$100. Intentional disclosure of information can lead to criminal sanctions punishable up to \$250,000 and 10 years in prison. Violations of SHR's HIPAA Policies and Procedures will lead to disciplinary actions up to and including termination.